DOCUMENT # P97000024746 1. Entity Name SCOTIA COMMUNICATIONS, INC.					FILED Feb 01, 2000 8:00 am Secretary of State		
Principal Plac	e of Business	Mailing Address				, 75 021 ***1 <i>5</i> 0.00	
'	RBOR CITY BLVD.	200 SOUTH HARBOR CITY E PENTHOUSE MELBOURNE FL 32901-1384	BLVD.		100 200 110 15 11 10 10 10 10 10 10	BINI BRILB 11811 BIBLI 18811 BI	
2. Principal P 325 Suite, Apt.	lace of Business Fifth Ave #, etc.	3. Mailing Address 325 F. + the Suite, Apt. #, etc.	. Ave		DO NOT WRITE	IN THIS SPACE	
Suita		Suite 204				1 1.	
Zip	(Au tic F)	City & State Indial aut	Country		FEI Number 59-3440668 Certificate of Status Desired		oplied For of Applicabl ditional
32903-	4270 U.S.A	32903-4270	U.S. A	l		Fee Require	
	6. Name and Address of Current I	Registered Agent	Name	7. l	Name and Address of New Re	gistered Agent	
200	Forth, Mark South Harbor City BLVD.		Street A		ath MARK Box Number is Not Acceptable)		
	Thouse Bourne FL 32901		325 City T	Fifth	Ave, Suite	204 FL Zip Code 3240	⋼ ⋛⋄ ⋚ ⋗⋬⋗⋾
8. The above	named entity submits this statement for	r the purpose of changing its r	registered office or	registered ag	ent, or both, in the State of Flori	da.	. ⊿ ⊧
}							
SIGNATURE .	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE:	Registered Agent signati	ure required when r	einstating)	DATE	
O This serve							
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of Stat				550.00	10. Election Campaign Fina Trust Fund Contribution.	~ _ ~	0 May Be I to Fees
11.	OFFICERS AND I		12.	AC	DDITIONS/CHANGES TO OFFIC		
TITLE NAME	D Seyforth, Mark A	☐ Delete	TITLE NAME			K Change	☐ Addition
STREET ADDRESS	200 SOUTH HARBOR CITY BLVD).	STREET ADDRESS	325	Fitth Ave Su	ite 204	
CITY-ST-ZIP	MELBOURNE FL 32901		CITY-ST-ZIP	Tudi A	Fitth Ave, Su Autic Fl 3291	03-4270	
TITLE	D	Delete	TITLE		RRY, Charles	🔀 Change	Addition
NAME STREET ADDRESS	MCMURRAY, CHARLES 115 N. FRANKLIN BLVD.		NAME STREET ADDRESS	טוא בואן	KRY, CHARLES		
CITY-ST-ZIP	TALLAHASSEE FL 32301		CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		
TITLE	D	☐ Delete	TITLE			☐ Change	Addition
NAME STREET ADDRESS	TAYLOR, ROSEMARY 49 MONACO DRIVE		NAME STREET ADDRESS				
CITY-ST-ZIP	INDIALANTIC FL 32903	•	CITY-ST-ZIP				
TITLE	D .	☐ Delete	TITLE		•	🔀 Change	☐ Addition
NAME	RENO, FRANK T	TT 500	NAME	27 5 1	Fifth Ave, Su	ite and	
STREET ADDRESS CITY-ST-ZIP	200 SO. HARBOR CITY BLVD., S MELBOURNE FL 32901	TE. 500	STREET ADDRESS CITY-ST-ZIP	1.1.	Initic Fl 329	102 201	
TITLE	MELBOOTHIAL 1 E OESO 1	Delete	TITLE	PUGIA	1/4 CIC, 1-1 329	☐ Change	☐ Addition
NAME			NAME				
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP				
TITLE		□ Delete	TITLE	 		☐ Change	☐ Addition
NAME		- Delete	NAME			onango	
STREET ADDRESS			STREET ADDRESS				
CiTY-ST-ZIP		Alexa Silina ad a series and a	CITY-ST-ZIP	Ladio Occide	440 07/0///\ Electe 0:		
indicated of the cor	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empo or on an attachment with an address, w	true and accurate and that movered to execute this report a	y signature shall h	ave the same	legal effect as if made under oa	th; that I am an officer	or director
CICNIAT	UDE. MANYANI		X-7	-40	1-75-5000	321-956-1	のこくご
SIGNAT		RINDED HAME OF SIGNING OFFICER O		NO	1-25-2000 Date	Daytime Phone #	<i>, - , -</i>